

APPLICATION PROCEDURE CHECKLIST FOR MISSOURI TEACHING CERTIFICATE

Your completed application packet must include each of the following items:

☐ **APPLICATION FORM**

Complete Section I, parts A-E. Processing time varies from 2-6 weeks depending on application activity!

☐ **EVALUATION FROM CREDENTIALING AGENCY**

Submit the office report from the credentialing agency in lieu of your foreign transcripts.

☐ **U.S. TRANSCRIPTS**

Official transcripts from **ALL** institutions attended within the **United States** must be provided. Please request that all transcript(s) be sent **TO YOU** in a sealed and signed envelope. The unopened envelope(s) must be included with your application packet. Transcripts may be submitted by the college or university when the institution will not send official transcripts to the applicant.

NOTE: An overall minimum grade point average of 2.5 on a 4.0 scale is required for initial certification and also in each additional area of certification.

☐ **APPLICATION FEE**

Include with your application packet a \$50.00 check or money order made payable to "Treasurer, State of Missouri."

Cash will not be accepted. **NOTE:** This fee is for processing your application and cannot be refunded nor does it guarantee that a certificate will be issued.

☐ **BACKGROUND CHECK**

Please refer to the enclosed Background Check Procedures checklist. Any questions regarding this portion of the application process must be directed to the Professional Conduct and Investigations Section at 573/522-8315. Enclose a check or money order for \$38 made payable to "Treasurer, State of Missouri". [You may request a background check packet from our website.](#)

Collect all required documentation and return it in a **SINGLE PACKET**. The application form, transcript(s), and teaching experience form(s) must be received in our office in sealed, official envelopes. The items become the property of the Department of Elementary and Secondary Education and will not be returned or released to other agencies..

PLEASE BE SURE THAT YOUR APPLICATION PACKET IS COMPLETE! An incomplete packet will not be processed. Mail the complete application packet to:

Educator Certification
Post Office Box 480
Jefferson City, MO 65102-0480
<http://dese.mo.gov>

[Check the status of your application on our website.](#)

Do not use this application for counseling, school psychologist, school psychological examiner, vocational or adult education certification.



MISSOURI DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION
DIVISION OF TEACHER QUALITY AND URBAN EDUCATION
EDUCATOR CERTIFICATION
POST OFFICE BOX 480
JEFFERSON CITY, MISSOURI 65102-0480
(573) 751-0051

APPLICATION FOR INITIAL MISSOURI TEACHING CERTIFICATE FOR NON-MISSOURI GRADUATES

SECTION I: TO BE COMPLETED BY APPLICANT. DO NOT USE THIS APPLICATION FOR COUNSELING, SCHOOL PSYCHOLOGIST, SCHOOL PSYCHOLOGICAL EXAMINER, OR ANY OTHER NON-CLASSROOM CERTIFICATION.

A. VITAL INFORMATION

*SOCIAL SECURITY NUMBER

☐ ENCLOSED IS \$50 CHECK OR MONEY ORDER FOR PROCESSING

CURRENT NAME (LAST, FIRST, MIDDLE INITIAL)

ALL MAIDEN/FORMER NAMES

STREET ADDRESS

CITY, STATE, ZIP CODE

DATE OF BIRTH

MALE ☐

FEMALE ☐

PHONE NUMBERS

H ()

W ()

B. LIST ALL STATES WHERE YOU HOLD OR HAVE HELD A TEACHING CERTIFICATE.

ENCLOSE A NOTARIZED COPY OF EACH CERTIFICATE.

C. MISSOURI AREA(S) OF CERTIFICATION REQUESTED.

SUBJECT AREA

GRADE LEVELS

D. PROFESSIONAL CONDUCT (ALL QUESTIONS MUST BE ANSWERED).

Applicants must submit two (2) full sets of fingerprints. Fingerprint cards must be obtained from and returned to the Missouri Department of Elementary and Secondary Education, Conduct & Investigations, PO Box 480, Jefferson City, MO 65102-0480 and may be completed by any law enforcement agency.

Please answer the following questions. If any of the questions are answered yes, please provide a separate statement of explanation.

- | | YES | NO |
|---|--------------------------|--------------------------|
| A. Have you ever been charged with, convicted or entered a plea, including a plea of <i>nolo contendere</i> , to any felony or misdemeanor whether or not sentence was imposed or suspended, except minor traffic violations? If yes, explain fully. | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Have you ever been denied a professional license, certificate, permit, credential, endorsement, or registration? | <input type="checkbox"/> | <input type="checkbox"/> |
| C. Has your professional license (except for driver's license), certificate, permit, credential, endorsement, or registration ever been disciplined, suspended, revoked, reprimanded, restricted, curtailed or voluntarily surrendered or do you have any pending complaints before any regulatory board or agency or is there any investigation or adverse action now pending against you? | <input type="checkbox"/> | <input type="checkbox"/> |
| D. Have you ever resigned, been restricted, disciplined, or discharged from any position, including the armed forces, while under suspicion of having engaged in criminal, immoral, unethical behavior or unprofessional conduct, or are you under investigation for any such charge? | <input type="checkbox"/> | <input type="checkbox"/> |

[*View the Social Security Number Disclosure Notice](#)

E. SWORN AFFIDAVIT

I, the below named applicant, hereby affirm under penalties of perjury that I am the applicant referred to in the preceding application for a certificate of license to teach in the state of Missouri, and that all statements and enclosures are true and accurate to the best of my knowledge, information and belief. I understand that any misrepresentation of facts may result in the denial or revocation of the requested certificate(s). I submit for consideration this application as required by the Missouri law governing the practice of teaching subject to the rules and regulations of the Missouri Department of Elementary and Secondary Education and the Missouri State Board of Education. I subscribe and agree to abide by all applicable laws and rules regarding the practice of teaching. I understand that the Missouri Department of Elementary and Secondary Education may require further information or evidence that it deems reasonable and proper. Furthermore, I voluntarily consent to a thorough investigation of my present and past employment and other activities for the purpose of verifying my qualifications. In addition, I grant permission to access any court, FBI, or police records related to arrests and convictions related to good moral character or personal fitness pertinent to my certification, and to probation or parole records as well.

LEGAL SIGNATURE OF APPLICANT

DATE

ORIGINAL SIGNATURE REQUIRED – NO FAXES OR PHOTOCOPIES!

<http://dese.mo.gov>